



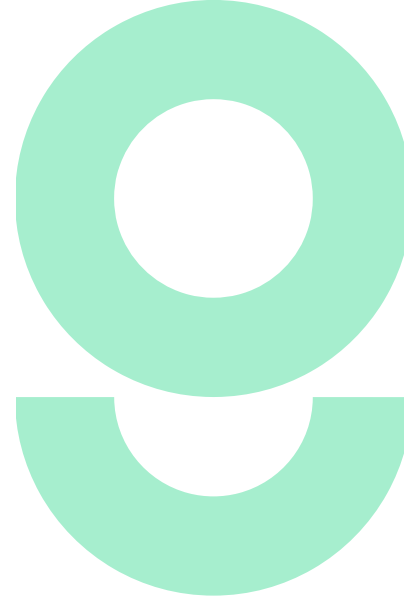
Country Specific Reports

Map existing or newly created hub-like structures



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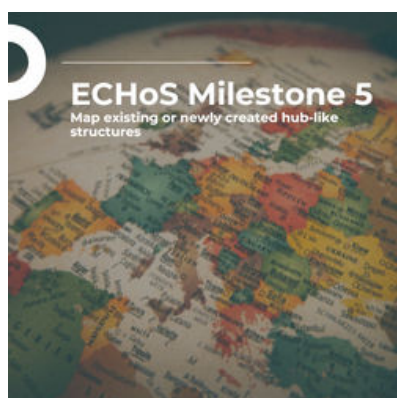
Türkiye



Introduction

The mapping of existing National Cancer Mission Hub-like structures (NCMH-like structures), in the 28 participating MS/AC, enabled to draw a correlation between existing or absent characteristics and specific strengths and challenges of NCMH-candidate structures, and also provided a valuable insight into the current European landscape, helping to assess the diversity of candidate structures in terms of positioning and governance (national, regional, or local hub-like structures, involvement of healthcare system, research, society, etc.). In addition, this will be valuable information to conduct a more in depth analysis on countries best practices, bottlenecks, and strengths.

The assessment was done as part of the work performed in WP2, Task 2.1 Definition of general design and operative NCMH structural elements, using a survey designed to gauge existing NCMH-like structures and to collect the perspectives of each country on the future NCMHs.



Milestone 5 - Map existing or newly created hub-like structures presents a summary of countries' responses, encompassing a comprehensive analysis of organisational characteristics, governance frameworks, stakeholder engagement, funding sources, and activities undertaken by the existing NCMH-like structures and the perspectives for the future NCMH.

Austria

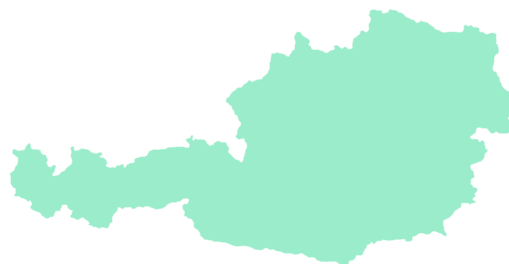


Does a NCMH-like structure exist?

Austria does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, but there is a potential candidate or an eligible organisation entity, Mission Action Group (MAG) Cancer Mirror Group, that is co-chaired by representatives of the MoH (BMSGPK) and MoResearch (BMBWF), supported by a Mission Management Unit hosted by the Austrian Research Funding Agency (FFG). The potential NCMH candidate would operate as a network structure, where the Ministry of Health, supported by the National Austrian Public Health Institute, would have a core role.

Who was involved?

Gesundheit Österreich GmbH (GÖG), the Austrian National Public Health Institute.



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer, national/regional/local cancer/health priorities and the European Beating Cancer Plan (EBCP). Other international policies, such as those of the WHO and UN-SDG, should also hold significance but with a slightly lower priority score. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the NCMH, it should be a legal organisation or coordinated national action integrating Thematic Working Groups, a Board of Stakeholders, an Executive Board, a Board of Policymakers and Advisory Boards. The suggested entities for integration into NCMH governing bodies include Patient Associations, Governmental Bodies (National, Regional, Local), Research Institutions, Academic Organisations, Healthcare Institutions and Medical Technology Providers. Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives within the same organisation. Regarding the prioritisation of communication tools for public awareness and outreach, newsletters, virtual meetings, and group dynamics are given the highest ratings. In terms of activities, the NCMH should prioritise participation and promotion of Research and Development (R&D) and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders) and oversight of the implementation of research and health policies.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Austria include coordination and promotion of cancer activities, linking European initiatives with national activities, facilitation of information and activities across stakeholders, and strengthening patient and citizen engagement processes.

Contact
Points



No information
provided.

Website



No information
provided.

Belgium

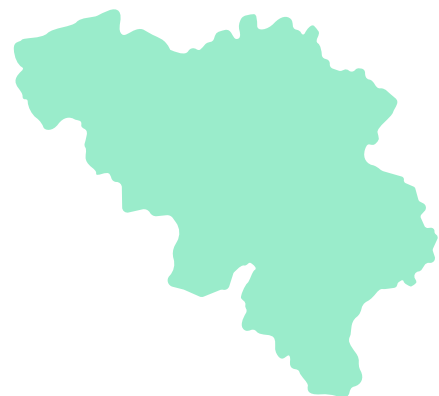


Does a NCMH-like structure exist?

Belgium has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named Belgian Europe's Beating Cancer Plan (EBCP) Mirror Group. This structure is a Coordinated National Action, hosted by Research Institutes, and is endorsed by governmental bodies, operating at a national and cross-national level. Its governance structure comprehends a single coordinator, a Governing Board, and a Thematic Working Group. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level, Regulatory Agencies and Research Institutions. This structure relies on Governmental funding and develops the following activities: direct participation in initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; publication of policy reports, opinions, white papers, etc. The monitoring and assessment of the performance of this structure is based on Key Performance Indicators.

Who was involved?

- Sciensano
- European Cancer Organisation (ECO)



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and the European Beating Cancer Plan (EBCP). National/regional/local cancer/health priorities also hold significance but with a slightly lower priority score. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for decision-making and high autonomy for financial matters (score 8 out of 9). Regarding the governance structure of the future NCMH, it should be a legal organisation, integrating a single coordinator, a Governing Board, Advisory Boards and Thematic Working Groups. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Research Institutions, Patient Associations, Professional Associations, Pharmaceutical and Biotechnological Industries and Organisations from the Social Sector. Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, social media, newsletters and news and other tools should be the main communications channels used. Nonetheless, in-person/hybrid events and reports and peer-reviewed publications should also be prioritised, but on a second level. On a third tier of priorities lie direct emails, virtual meetings, workshops, and group dynamics (such as focus groups). Lastly, traditional media channels (such as television, radio, newspapers, and magazines) should be given a lower priority. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders) and publication of policy reports, opinions, white papers, etc.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Belgium include: better alignment of Belgium's cancer policy aims, and field activities with EBCP and EU Cancer Mission; systematic identification of funding opportunities for cancer research, care, and control; optimised allocation of resources in a competitive and complex tendering environment; uptake of interventions that reduce the cancer burden, and improve the care, survival, and quality of life of patients in Belgium; and strengthened collaborations amongst national cancer stakeholders and EU counterparts.

Contact Points

Marie Delnord
Jinane Chattas

Website

[Belgian Mirror Group](#)
and [European Cancer Organisation](#)

Croatia

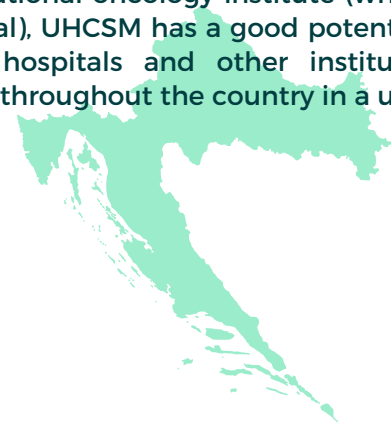


Does a NCMH-like structure exist?

Croatia currently lacks a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS. However, the current situation revolves around informal conversations with various stakeholders. At present, the University Hospital Centre “Sisters of Mercy” (UHCSM) is the potential candidate for the role of an NCMH. This organisation was founded in 1846 and is one of the oldest, but also one of the largest, health care institutions in the Republic of Croatia, which carries out diagnostic, treatment, medical rehabilitation, and health care procedures in addition to specialist services in all areas of medicine. Tumour Clinic, the largest individual tumour clinic in the Republic of Croatia, also operates within the UHCSM. UHCSM has an extensive teaching and learning program for students, doctors, and other health professionals. The hospital has the right to conduct specialist examinations in all areas of medicine, and as a teaching base for the Faculties of Medicine, Dentistry, Pharmacy - Biochemistry, Philosophy, Education - Rehabilitation and the Polytechnic of Health, it organises and conducts undergraduate and postgraduate courses for students. Various and dynamic scientific activities take place in the hospital, which is also evident from the fact that the hospital has established 28 reference centres of the Ministry of Health of the Republic of Croatia, including in numerous areas of oncology. Although UHCSM is not the largest hospital and health institution in the capital of Croatia, Zagreb, nor in the Republic of Croatia, however, as an institution with the longest tradition in medicine, which deals with the prevention and treatment of cancer patients, education of students and health personnel of all medical profiles, and which as early as 1968 worked on the organisation of a special national oncology institute (which is now an integral part of the hospital), UHCSM has a good potential to unite both smaller and larger hospitals and other institutions, partners and patients associations throughout the country in a united fight against cancer.

Who was involved?

University Hospital Center
“Sestre milosrdnice” (UHCSM)



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and on a smaller focus to national/regional/local cancer/health priorities. Lower priority should be assigned to the European Beating Cancer Plan (EBCP) and other international policies, such as those of the WHO and UN-SDG, respectively. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Consortium, integrating a single coordinator, an Executive Board, Advisory Boards, and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Pharmaceutical and Biotechnological Industries, Medical Technology Providers and Organisations from the Social Sector. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives within the same organisation. Regarding the prioritisation of communication tools for public awareness and outreach, traditional media channels (such as television, radio, newspapers, and magazines) and in person / hybrid events should be the main communications channels used. Nonetheless, news and other tools on websites, workshops and reports & peer reviewed publications should also be prioritised, but on a second level. On a third tier of priorities lie group dynamics (such as focus groups). Lastly, social media, virtual meetings, direct emails, and newsletters should be given a lower priority. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Facilitate integration of the activities of the Mission on Cancer at national, regional, and local levels e.g., identifying synergies between European, national, regional and local policies and initiatives related to cancer; facilitate engagement of relevant actors and stakeholders at national, regional, or local level going beyond the research and innovation and health systems to cover all relevant areas in cancer control and support policy dialogues on cancer (examples include employment, education, socio-economic aspects); and support citizen engagement activities at national, regional and local levels, including new participatory formats.

Contact Points

Ines Potočnjak
Marija Bubaš
Dunja Skoko Poljak

Website

Kliničkog bolničkog
centra Sestre
Milosrdnice

Cyprus



Does a NCMH-like structure exist?

Cyprus currently lacks a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS. Over the last decade, the situation revolved around different actors that partially fulfilled the different roles of a future NCMH. However, in December 2023 the President of the Republic of Cyprus announced the State's decision to proceed with the foundation of the country's National Cancer Institute assigning a starting funding amount in the Health Ministry's budget of €1.2 million. The relevant bill is due to be prepared and expected to be submitted to the Parliament for voting within 2024. Upon its establishment the National Cancer Institute is expected to fulfil the role of the NCMH.

Who was involved?

Cyprus Cancer Research Institute (CCRI)



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer, the European Beating Cancer Plan, and the national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high autonomy (score of 8 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Consortium, integrating Advisory Boards, an Executive Board, and a Governing Board. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Pharmaceutical and Biotechnological Industries and Volunteering Associations. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of the NCMH and its goals. The NCMH should count on a shared staff with other initiatives within the same organisation. Regarding the prioritisation of communication tools for public awareness and outreach, traditional media channels (such as television, radio, newspapers, and magazines) and social media should be the main communications channels used. Nonetheless, group dynamics (such as focus groups), in person / hybrid events, news and other tools on websites, reports & peer reviewed publications and workshops should also be prioritised, but on a second level. On a third tier of priorities lie direct emails, newsletters, and virtual meetings. In terms of activities, the NCMH should prioritise organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders), participation and promotion of R&D and/or policy projects, funding of external R&D and/or policy projects, publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Expectations include ensuring appropriate coordination of all actions in cancer care, research, innovation, and patient engagement at a national and European level. Cyprus' National Cancer Institute will streamline cancer care strategies, through a comprehensive national cancer plan focusing on prevention, early detection, optimal treatment, palliative care, and research. It will involve and align the efforts of all stakeholders including the Health Insurance Organisation, healthcare professionals, oncology hospitals and centres, patient groups, research units and academic institutions and advocacy groups, to implement evidence-based interventions. Additionally, the National Cancer Institute will oversee the cancer registry, ensuring accurate data collection and analysis to inform healthcare policies and programs. Cancer research activity in Cyprus will be enhanced which will ultimately translate into therapeutic benefits for patients.

Contact
Points

No information
provided.

Website

No information
provided.

Czechia

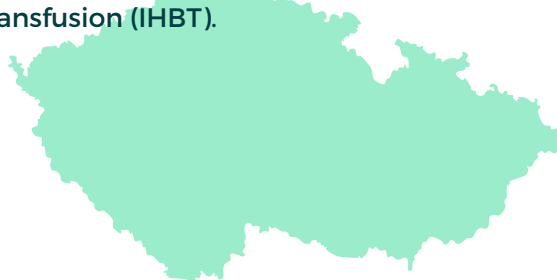


Does a NCMH-like structure exist?

Czechia does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, but several organisations (including UHKT, FNUSA, FNOL, NUVR and MZ) are negotiating the form of the future NCMH. The potential NCMH candidate would operate as a Consortium, hosted by multiple organisations (Governmental Bodies; Research Institutes; Academic Organisations; and Healthcare Institutions), and would not be endorsed by governmental bodies, although operating at a national level. Its governance structure would comprehend a single coordinator, an Executive Board, an Advisory Boards, despite this not being the final structure. The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Research Institutions, Academic Organisations and Healthcare Institutions. There is no source of funding predicted for this structure yet, but it would develop activities such as: direct participation initiatives or projects that are relevant for cancer research and/or policymaking; organisation of events (citizen engagement events, knowledge exchange, trainings, workshops, and related events); policy dialogues with multiple stakeholders; publication of policy reports, opinions, white papers, etc. Currently there is no mechanism to monitor and assess the structure's performance.

Who was involved?

- Fakultní nemocnice Olomouc (FNOL), the Olomouc University Hospital.
- Fakultní nemocnice u sv. Anny v Brně (FNUSA), the St. Anne's University Hospital Brno; and Mezinárodní centrum klinického výzkumu (ICRC), the International Clinical Research Center.
- Ústav hematologie a krevní transfuze (ÚHKT), the Institute of Hematology and Blood Transfusion (IHBT).



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the national/regional/local cancer/health priorities. On a lower level it should focus both the Mission on Cancer and the European Beating Cancer Plan, while giving a lower priority to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for decision-making and a medium-high autonomy (score of 6 out of 9) for financial matters. Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating a single coordinator, an Executive Board and Advisory Boards. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Research Institutions, Academic Organisations, Healthcare Institutions, Professional Associations and Pharmaceutical and Biotechnological Industries. Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, newsletters should be the main communication channel used. Nonetheless, social media, direct emails, and group dynamics (such as focus groups) should also be prioritised, but on a second level. On a third tier of priorities lie workshops, traditional media channels (such as television, radio, newspapers, and magazines) and reports & peer reviewed publications. Lastly, in person / hybrid events, news and other tools on websites and virtual meetings should be given a lower priority. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders) and publication of policy reports, opinions, white papers, etc.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Czechia include, from the Mission on Cancer call: facilitation of the integration of activities of the Mission on Cancer at national, regional, and local levels (e.g., identifying synergies between European, national, regional and local policies and initiatives related to cancer); engagement facilitation of relevant actors and stakeholders at national, regional or local levels going beyond research and innovation, and health systems to cover all relevant areas in cancer control and support policy dialogues (examples include, employment, education, socio-economic aspects); and support of citizen engagement activities at national, regional and local levels, including new participatory formats.

Contact Points



No information provided.

Website



NUVR, FNUSA and UHKT



Estonia



Does a NCMH-like structure exist?

Estonia currently lacks a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS. At the present, the NCMH, as a separate organisation, is under creation. The national cancer hub development discussions are underway and concrete proposals for its establishment have been made. The hub or the cancer organisation is primarily supported by the ministry of social affairs, two universities and two cancer centres.

Who was involved?

- Sihtasutus Tartu Ülikooli Kliinikum (TUH).
- Tartu Ülikool (UTARTU).



Aspiring

NCMH



The NCMH should equally focus and prioritise actions/activities within the scope of the Mission on Cancer, European Beating Cancer Plan, and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national with a high, but not full, autonomy for decision-making (score of 7 out of 9) and high autonomy for financial matters (score of 8 out of 9). Regarding the governance structure of the future NCMH, it should be a legal organisation, integrating a Board of Stakeholders, a single coordinator, a Governing Board and Advisory Boards. The suggested entities for integration into the NCMH governing bodies include Governmental Bodies (National, Regional, Local), Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Regulatory Agencies and Professional Associations. Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, traditional media channels (such as television, radio, newspapers, and magazines), news and other tools on websites, reports & peer reviewed publications and social media should be the main communications channels used. Nonetheless, direct emails, group dynamics (such as focus groups), in person/hybrid events, newsletters and virtual meetings should also be prioritised, but on a second level. On a third and last tier of priorities lie workshops. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders), oversight the implementation of Research and Health Policies and publication of policy reports, opinions, white papers, etc.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Estonia include better cooperation between all stakeholders, faster and better communication, and better and more advised decisions for cancer care.

Contact
Points

No information
provided.

Website

No information
provided.

Finland



Does a NCMH-like structure exist?

Finland is in a process of establishing a National Cancer Mission Hub, as defined by ECHoS. The Finnish Cancer Center FICAN, in collaboration with the Cancer Society of Finland, Finnish Institute for Health and Welfare and the Ministry of Social Affairs and Health are starting the work on National Cancer Plan. The steering group for this also acts as the steering group of the NCMH Finland initiative. NCMH Finland will be formed as a part of National Cancer Plan to facilitate the implementation of the European Mission on Cancer and the European Beating Cancer Plan at the national level.

In initial plans NCMH Finland operates as a developing Joint Venture, involving a variety of stakeholders including Healthcare Institutions, Academic Organisations, Patient Associations, Professional Associations, Pharmaceutical and Biotechnological Industries and Government Bodies. Its governance structure consists of a coordinator (secretariat), a Steering Group, an Advisory Board, and working groups. The stakeholders involved in the governance of this structure include the Cancer Society of Finland, Finnish Institute for Health and Welfare and the Ministry of Social Affairs and Health.

The NCMH Finland structure relies on governmental, private and competitive funding and is developed during 2024-2025. The NCMH will develop activities relevant for the implementation of the European Mission on Cancer and the European Beating Cancer Plan at the national level; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; publication of policy reports, opinions, white papers, etc..

The monitoring and assessment of the performance of this structure is anticipated to be based on Key Performance Indicators as well as on the analysis by external experts.

Who was involved?

- Suomen Syöpäyhdistys, the Cancer Society of Finland (CSF).
- Suomen kansallinen syöpäkeskus Finlands nationella cancercentret, the Finnish Cancer Center (FICAN).



Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating Cancer Plan and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. The governing bodies of the NCMH Finland initiative are the Cancer Society of Finland, Finnish Institute for Health and Welfare and the Ministry of Social Affairs and Health. Governmental, private and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of the NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach social media, news and websites, in person/hybrid events, workshops, reports & peer reviewed publications should be the main communications channels used. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of research and health policies.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Finland include the planning and implementing of the National Cancer Plan.

Contact Points

● Tomi Mäkelä and Juha Pekka Turunen

Website

● FICAN and Cancer Society of Finland

Country Specific Report

France

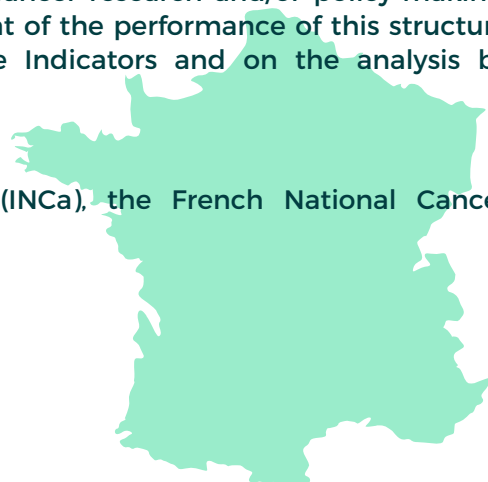


Does a NCMH-like structure exist?

France has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named Institut National Du Cancer. This structure is a Legal Organisation, hosted by Governmental Bodies, and is endorsed by governmental bodies, operating at a national and cross-national level. The final governance structure is not decided yet. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Organisations from the Social Sector and Volunteering Associations. This structure relies on Governmental funding and develops the following activities: funding of external initiatives or projects that are relevant for cancer research and/or policy making; direct participation in initiatives or projects that are relevant for cancer research and/or policy-making; aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; publication of policy reports, opinions, white papers, etc.; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); and activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making. The monitoring and assessment of the performance of this structure is based on Key Performance Indicators and on the analysis by external experts.

Who was involved?

Institut National du Cancer (INCa), the French National Cancer Institute.



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of other international policies, such as those of the WHO and UN-SDG. Lower priority should be assigned to activities in the scope of the Mission on Cancer, the national/regional/local cancer/health priorities and the European Beating Cancer Plan (EBCP). The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested medium-high autonomy (score of 6 out of 9) for decision-making and no autonomy (score of 1 out of 9) for financial matters. Regarding the governance structure of the future NCMH, it should be a legal organisation, integrating a General Assembly and a Thematic Working Group. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Organisations from the Social Sector and Volunteering Associations. Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, direct emails, in person/hybrid events, virtual meetings and workshops should be the main communications channels used. Nonetheless, group dynamics (such as focus groups), newsletters and news and other tools on websites should also be prioritised, but on a second level. On a third tier of priorities lie social media. Reports & peer reviewed publications are not considered to be a priority communication tool. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in France include informing national stakeholders on EU initiatives and strengthen their capacities and willingness to participate efficiently.

Contact Points

● Thomas Dubois

Website

● Institut National du Cancer

Germany



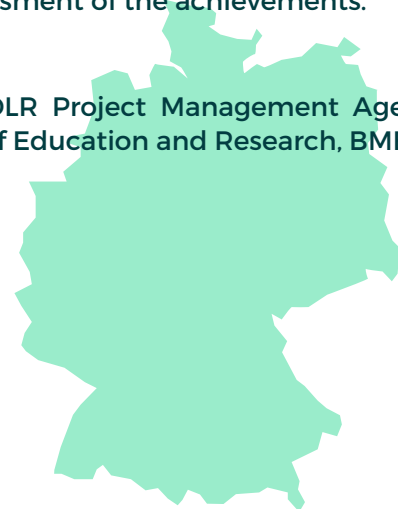
Does a NCMH-like structure exist?

Germany has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, namely the Steering Committee of the National Decade Against Cancer. This structure represents a Consortium, compiled by multiple organisations (governmental, private and professional bodies and research institutes), operating at a national and cross-national level. Its governance structure comprehends two chairpersons, three Thematic Working Groups, and a Board of Stakeholders (the Steering Committee).

The stakeholders involved in this structure are Governmental Bodies operating at national level, Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Statutory Health Insurance Funds, Federal State. This structure relies on Governmental, private and competitive funding and develops the following activities: funding of initiatives or projects that are relevant for cancer research and/or policy making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level. The monitoring and assessment of the performance of this structure is based on self-assessment of the achievements.

Who was involved?

DLR-Projektträger (DLR-PT), the DLR Project Management Agency (on behalf of the Federal Ministry of Education and Research, BMBF).



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and to the national/regional/local cancer/health priorities, followed by actions related to the European Beating Cancer Plan (EBCP). Lower priority should be assigned to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating a single coordinator and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Pharmaceutical and Biotechnological Industries, Medical Technology Providers and Health Insurance Funds. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, in person/hybrid events, news and other tools on websites, social media, virtual meetings and workshops should be the main communications channels used. Nonetheless, traditional media channels (such as television, radio, newspapers, and magazines) should also be prioritised, but on a second level. On a third tier of priorities lie direct emails, newsletters, and reports & peer reviewed publications. Lastly, group dynamics (such as focus groups) should be given a lower priority. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation, and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders) and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

It is expected for the NCMH to bridge the national (Decade Against Cancer, with a focus on strengthening cancer RESEARCH) with the European activities (Cancer Mission = mainly improving cancer research, European Beating Cancer Plan = mainly improving cancer care). From the many national and regional undertakings in Germany, at least some (if not all) will be contributing to the EC cancer mission goals. On the other hand, knowledge about the concrete Cancer Mission actions will be relevant for shaping future national programs. There might be a potential for synergies, among others by learning from other countries' plans on how to support the Cancer Mission.

Contact
Points

Anja Hundrack

Website

National Decade
against Cancer

Greece



Does a NCMH-like structure exist?

Greece currently lacks a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS. However, the current situation revolves around informal conversations with various stakeholders.

At the present, Cancer Guidance Centre (Kapa3) is the potential candidate for the role of an NCMH. The goal of this Centre is to assist every person in all aspects of their disease and to improve living conditions by providing any necessary assistance and service for both the patient and their families and caregivers with an open and honourable approach. An Integrated Centre for Research on Cancer in Athens (ACCC- Athens Comprehensive Cancer Centre) has been established involving relevant selected laboratories in research centres and universities and selected clinics in public hospitals.

Who was involved?

Ethniko Kentro Tekmiriosis Kai Ilektronikou Periechomenou (EKT), the National Documentation Centre.



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer, the national/regional/local cancer/health priorities, the European Beating Cancer Plan (EBCP) and the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for decision-making and lower autonomy (5 out of 9) for financial matters. Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating a Governing Board, a General Assembly, an Executive Board, Advisory Boards, a Board of Stakeholders, and a Board of Policymakers. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Funding Agencies, Research Institutions, Healthcare Institutions, Patient Associations, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Organisations from the Social Sector, Academic Organisations and Regulatory Agencies. Governmental and private funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, in person/hybrid events, traditional media channels (such as television, radio, newspapers, and magazines) and workshops should be the main communications channels used. Nonetheless, group dynamics (such as focus groups), news and other tools on websites, newsletters and social media should also be prioritised, but on a second level. On a third and last tier of priorities lie direct emails, reports & peer reviewed publications and virtual meetings. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation, and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Greece include that all stakeholders should be informed and be able to comprehend how to improve cancer prevention. Patients and citizens in general need to be involved and at the centre of policy making and equitable access is an understatement.

Contact
Points



No information
provided.

Website



No information
provided.



Hungary



Does a NCMH-like structure exist?

Hungary has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named National Institute of Oncology. This structure is a Legal Organisation, hosted by healthcare institutions, and is endorsed by governmental bodies, operating at a national and cross-national level. Its governance structure comprehends a Governing Board and Advisory Boards. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level, Regulatory Agencies, Funding Agencies, Research Institutions, Healthcare institutions and Patient Associations. This structure relies on Governmental funding and develops the following activities: funding of internal initiatives or projects that are relevant for cancer research and/or policy making; funding of external initiatives or projects that are relevant for cancer research and/or policy making; direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; publication of policy reports, opinions, white papers, etc. The monitoring and assessment of the performance of this structure is based on Key Performance Indicator and on the analysis by external experts.

Who was involved?

Országos Onkológiai Intézet (OOI), the National Institute of Oncology (NIO).



Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating cancer Plan and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested full autonomy (score of 9 out of 9) for decision-making and high autonomy (8 out of 9) for financial matters. Regarding the governance structure of the future NCMH, it should be a Legal Organisation, integrating a Governing Board and Advisory Boards. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations and Pharmaceutical and Biotechnological Industries. Governmental and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives within the same organisation. Regarding the prioritisation of communication tools for public awareness and outreach, traditional media channels (such as television, radio, newspapers, and magazines) and reports & peer reviewed publications should be the main communications channels used. Nonetheless, group dynamics (such as focus groups), in person/hybrid events, social media and virtual meetings should also be prioritised, but on a second level. On a third and last tier of priorities lie direct emails, news and other tools on websites, newsletters, and workshops. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation, and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Hungary expects the NCMH to act as a focal point to facilitate the integration of the activities of the Mission on Cancer and create synergies at the national, regional and local level, while involving all relevant stakeholders in order to facilitate the implementation of the EU Cancer Mission through various projects.

Contact Points

● Csaba Polgár

Website

● National Institute of Oncology

Ireland



Does a NCMH-like structure exist?

Ireland currently lacks a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS. However, the current situation revolves around informal conversations with various stakeholders. At the present, there are potential candidates for the role of a NCMH: the potential candidates are the National Cancer Control Programme (NCCP), and the All-Island Cancer Research Institute (AICRI), working with other stakeholders. Ireland is represented within the ECHoS project by the HSE NCCP as the primary national lead and the AICRI as co-participant. The HSE NCCP was established in 2007 to implement the recommendations of the Cancer Strategy 2006, it is a National Directorate of the Health Service Executive and is responsible for ensuring that relevant elements of cancer policy, as set out in the National Cancer Strategies are delivered to the maximum extent, with the goal of achieving better outcomes for patients. The NCCP works with partners in the Health Service Executive (HSE), Department of Health (DOH), health service providers and other stakeholders to prevent cancer, treat cancer and increase survival and quality of life for those who develop cancer, by converting the knowledge gained through research, surveillance and outcome evaluation into strategies and actions. The AICRI is a rapidly emerging virtual institute which is creating an overarching framework for cancer research across the island of Ireland. AICRI has brought together ten academic institutions and multiple other stakeholders from the healthcare sector, cancer patients, cancer charities, industry partners and government agencies. It has a broad research programme from cancer prevention to cancer diagnosis and treatment to survivorship and quality of life. AICRI spans the continuum from basic research to clinical care, covering the areas of cancer prevention, diagnostics, therapeutics, and survivorship. Both the NCCP and AICRI will collaborate closely with the consortium coordinators and leading experts across Europe, to establish a National Cancer Mission Hub (NCMH) in Ireland. This combined effort will coordinate Research & Innovation and Healthcare actions on cancer, moving policy-making processes towards people-centric healthcare and research systems in ways that cannot be achieved through individual efforts and fragmented initiatives.

Who was involved?

- National Cancer Control Programme, the Health Service Executive (NCCP, HSE).
- All-Island Cancer Research Institute (AICRI - based in University College Dublin).

Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer, the national/regional/local cancer/health priorities, the European Beating Cancer Plan (EBCP) and the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested medium autonomy (score of 5 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Consortium, integrating a Governing Board, Advisory Boards and a Thematic Working Group. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Funding Agencies, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations and Organisations from the Social Sector. Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach in person/hybrid events and virtual meetings should be the main communications channels used. Nonetheless, reports & peer reviewed publications, social media and workshops should also be prioritised, but on a second level. On a third tier of priorities lie direct emails, group dynamics (such as focus groups), traditional media channels (such as television, radio, newspapers, and magazines), news and other tools on websites and newsletters. In terms of activities, the NCMH should prioritise organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders) and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

The establishment of a NCMH aligns with Ireland's National Cancer Strategy 2017-26, which has a particular focus on involving patients in their own cancer care and further developing the role of research to improve cancer services, as well as aligning with the principles of Sláintecare and the involvement of citizens in how Ireland shapes its health services. It is a key step towards strengthening the voice of national stakeholders in cancer policies in Europe. It will foster national and international collaboration, promote inclusivity, and drive innovation in cancer care and also help to accelerate and embed cancer research in Ireland. The NCMH is an opportunity to tailor our cancer landscape to the precise needs of our patients and society and it is expected to develop some guidelines and tools that can help other organisations to implement relevant, impact-driven, research and policy dialogues in meaningful areas of health and beyond.

Contact Points

● No information provided.

Website

● No information provided.

Israel



Does a NCMH-like structure exist?

Israel has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named National Council for the Prevention and Treatment of Malignant Diseases. This structure is a Legal Organisation, hosted by Governmental Bodies, and is endorsed by governmental bodies, operating at a national level. Its governance structure comprehends an Executive Board, and a Board of Policymakers. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level, Regulatory Agencies, Funding Agencies, Academic Organisations, Healthcare institutions, Patient Associations and Professional Associations. This structure relies on Governmental funding and develops the following activities: funding of internal initiatives or projects that are relevant for cancer research and/or policy making; direct participation initiatives or projects that are relevant for cancer research and/or policymaking; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policymaking; publication of policy reports, opinions, white papers, etc. Currently there is no mechanism to monitor and assess the structure's performance.

Who was involved?

Ministry of Health (CSO-MoH).



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and the national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG, and an even lower to the European Beating Cancer Plan (EBCP). The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating an Executive Board, a Governing Board, Advisory Boards, a General Assembly, a Thematic Working Group, a Board of Stakeholders, and a Board of Policymakers. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Academic Organisations, Healthcare Institutions, Patient Associations and Professional Associations. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives within the same organisation. Regarding the prioritisation of communication tools for public awareness and outreach, traditional media channels (such as television, radio, newspapers, and magazines), reports & peer reviewed publications and social media should be the main communications channels used. Nonetheless, in person/hybrid events, news and other tools on websites, virtual meetings, and group dynamics (such as focus groups) should also be prioritised, but on a second level. On a third tier of priorities lie direct emails and workshops. Lastly, newsletters should be given a lower priority. In terms of activities, the NCMH should prioritise oversight the implementation of Research and Health Policies, publication of policy reports, opinions, white papers, etc and participation and promotion of R&D and/or policy projects.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Israel include the study of best practices and to share knowledge with other mission hubs.

Contact Points

Netta Koren

Website

National Council for the Prevention and Treatment of Malignant Diseases

Country Specific Report

Italy

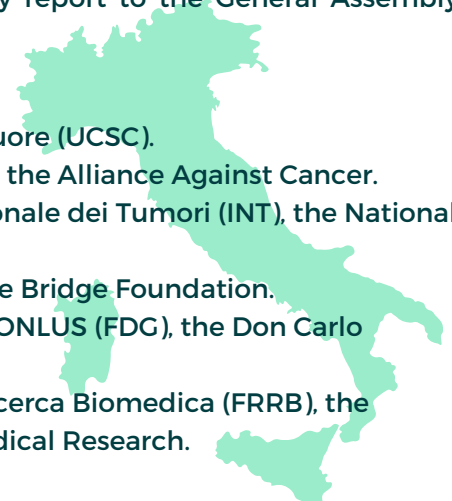


Does a NCMH-like structure exist?

Italy does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, but there is a potential candidate or an eligible organisation entity: the Alleanza Contro il Cancro (ACC). The potential NCMH candidate would operate as a Legal Organisation, hosted by multiple organisations (Governmental Bodies; Research Institutes; Academic Organisations; Healthcare institutions; Patient Associations; and Professional Associations), and would be endorsed by governmental bodies, operating at a national and cross-national level. Its governance structure would comprehend an Executive Board, a Governing Board, a General Assembly, and a Thematic Working Group. The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations and Volunteering Associations. This structure would rely on Governmental and competitive funding, as well as on European grants and would develop activities such as: funding of internal initiatives or projects that are relevant for cancer research and/or policy making; funding of external initiatives or projects that are relevant for cancer research and/or policy making; direct participation initiatives or projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); and publication of policy reports, opinions, white papers, etc. The monitoring and assessment of the performance of this structure would be based on annual activity report to the General Assembly and annual external financial audit.

Who was involved?

- Università Cattolica del Sacro Cuore (UCSC).
- Alleanza Contro Il Cancro (ACC), the Alliance Against Cancer.
- Fondazione IRCCS Istituto Nazionale dei Tumori (INT), the National Tumours Institute, Milan.
- Fondazione The Bridge (FTB), the Bridge Foundation.
- Fondazione Don Carlo Gnocchi ONLUS (FDG), the Don Carlo Gnocchi Foundation.
- Fondazione Regionale Per La Ricerca Biomedica (FRRB), the Regional Foundation for Biomedical Research.



Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating cancer Plan and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested medium-high, but not full, autonomy (score of 6 out of 9) for decision-making and for financial matters (score of 7 out of 9). Regarding the governance structure of the future NCMH, it should be a legal organisation, integrating a single coordinator, an Executive Board, a Governing Board, a General Assembly, a Thematic Working Group, a Board of Policymakers, and an External Advisory Board. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations and Professional Associations. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, news and other tools on websites should be the main communications channels used. Nonetheless, social media, virtual meetings, group dynamics (such as focus groups), in person/hybrid events and workshops should also be prioritised, but on a second level. On a third tier of priorities lie traditional media channels (such as television, radio, newspapers, and magazines). Lastly, reports & peer reviewed publications, direct emails and newsletters should be given a lower priority. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and funding to ensure sustainability.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Italy include that the NCMH must assume a leadership role in driving initiatives aimed at the effective implementation of cancer-related healthcare policies. Italy's national healthcare landscape is undeniably fractured, riddled with disparities that demand attention. Therefore, the primary objective is to champion initiatives aimed at bridging the local divides in terms of cancer prevention and access to care. Furthermore, it is imperative to acknowledge the presence of significantly biased information regarding the substantial availability of national and international funding allocated to oncology research. In light of this, these Hubs should play a vital role in disseminating accurate information within the field and extending support to institutions in comprehending the requisites necessary to apply for such funding opportunities.

Aspiring

NCMH



Expectations for the Future NCMH (cont.)

A pivotal responsibility of these Hubs should unquestionably revolve around the promotion of research with the objective of maximising the impact of cancer research/diagnosis/treatment, avoiding redundant and fragmented efforts.

The organic collection of evidence for each proposal would enable a comprehensive understanding of the elements that are still lacking to implement certain approaches and those that are ready for practical application in the field. This, in turn, would facilitate the prioritisation and optimisation of investments, as well as the formulation of guidelines on how to direct further research endeavours within the domain of cancer care. A NCMH could be an amplifier and advocate of national instances at the European level and could contribute to tailor health policies to the precise needs of patients and society facilitating the engagement of relevant actors and stakeholders in research and innovation within health systems at national and regional level and supporting citizen engagement activities through new participatory formats common at EU level. National Cancer Mission Hubs hold the potential to reshape Italy's approach to cancer care, fostering equity, informed decision-making, and innovative advancements in the fight against this disease.

Contact Points

● Lidia Villanova and
Valentina Trapani

Website

● [Alliance Against
Cancer](#)

Latvia



Does a NCMH-like structure exist?

Latvia does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, but there is a potential candidate or an eligible organisation entity: the Future Latvian Cancer Centre, together with Ministry of Health, Ministry of Environmental Protection and Regional Development of the Republic of Latvia. The potential NCMH candidate would operate as a Joint Venture, hosted by multiple organisations (Governmental Bodies; Healthcare Institutions; Professional Associations; Research Institutes; and Patient Associations), and would be endorsed by governmental bodies, operating at a national and cross-national level. Its governance structure would comprehend a Governing Board. The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Research Institutions, Healthcare Institutions, Professional Associations and Patient Associations. If Governmental Bodies were to be involved in the governance of this structure, it would be at a national level. This structure would rely on Governmental Funding and would develop activities such as: funding of internal initiatives or projects that are relevant for cancer research and/or policy making; funding of external initiatives or projects that are relevant for cancer research and/or policy making; direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; and coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level. The monitoring and assessment of the performance of this structure would be based on Key Performance Indicators.

Who was involved?

- Rīgas Austrumu klīniskās universitātes slimnīca (RAKUS), the Riga East University Hospital (REUH).
- Latvijas Universitāte (LU), the University of Latvia.



Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating cancer Plan and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Joint Venture, integrating a Governing Board. The suggested entities for integration into NCMH governing bodies include Research Institutions, Healthcare Institutions, Patient Associations and Governmental Bodies (National, Regional, Local). Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on a dedicated staff, shared with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, social media and news and other tools on websites should be the main communications channels used. Nonetheless, newsletters should also be prioritised, but on a second level. On a third tier of priorities lie direct emails, virtual meetings, workshops, and reports & peer reviewed publications. Lastly, in person/hybrid events, traditional media channels (such as television, radio, newspapers, and magazines) and group dynamics (such as focus groups) should be given a lower priority. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects and organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders).

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Latvia include that all cancer missions are gathered, all initiatives are coordinated equally, and that the collaboration is facilitated among different stakeholders in National level in Latvia. We hope that upcoming NCMH would facilitate better data sharing and research findings, due to better collaboration.

Contact Points

Veselības ministrija
and ASLIMNICA

Website

Ministry of Health

Lithuania



Does a NCMH-like structure exist?

Lithuania have dedicated organisations or structures fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named Monitoring Council for the implementation of the National Cancer prevention and Control Program and organisation of oncology services in Lithuania (of the National Cancer Prevention and Control Program 2014-2025). This structure is a Legal Organisation, hosted by multiple organisations (Governmental Bodies; Research Institutes; Academic Organisations; Healthcare institutions; Patient Associations; and Professional Associations), and is endorsed by governmental bodies, operating at a national level. Its governance structure comprehends an Executive Board, a Governing Board, and a Board of Stakeholders. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level, Regulatory Agencies, Research Institutions, Academic Organisations, Healthcare institutions, Patient Associations, Professional Associations and Pharmaceutical and Biotechnological Industries. There is no source of funding for this structure. The structure develops the following activities: direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; publication of policy reports, opinions, white papers, etc. The monitoring and assessment of the performance of this structure is based on Key Performance Indicators.

Who was involved?

- Lietuvos mokslo taryba (LMT), the Research council of Lithuania (RCL).
- Klaipėdos universitetas (KU), the Klaipėda University.
- Lietuvos Sveikatos Mokslų Universitetas (LSMU), the Lithuanian University of Health Sciences.
- Lietuvos sveikatos mokslų universiteto ligoninė Kauno klinikos, the Hospital of Lithuanian University of Health Sciences Kauno klinikos.



Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating cancer Plan and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating an Executive Board, a Governing Board, and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Pharmaceutical and Biotechnological Industries and Organisations from the Social Sector. Governmental and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, traditional media channels (such as television, radio, newspapers, and magazines), newsletters, news and other tools on websites, reports & peer reviewed publications, social media and virtual meetings should be the main communications channels used. Nonetheless, direct emails, group dynamics (such as focus groups), in person/hybrid events and workshops should also be prioritised, but on a second level. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation, and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders) and publication of policy reports, opinions, white papers, etc.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Lithuania include: improvement of the management and coordination of cancer care; expanding preventive health care services and develop an informed and healthy society; improvement of the organisation and implementation of cancer screening programs; ensuring high-quality comprehensive cancer diagnosis and treatment and to reduce inequalities in the availability of services and social exclusion; improvement of the quality of life and end of life of cancer patients; improvement of the quality of oncology education, to develop research; development of cooperation with NGOs in the field of oncology and NGO activities in society; and ensuring comprehensive and high-quality oncology data registration and publicly available information.

Contact Points

● National Cancer Prevention and Control Program 2014-2025

Website

● Information not provided.

Luxembourg



Does a NCMH-like structure exist?

Luxembourg does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure as defined by ECHoS, but there is a potential candidate or an eligible organisation entity: the Institut National du Cancer (INC). The potential NCMH candidate would operate as a Legal Organisation, hosted by an association without lucrative purpose, and would be endorsed by governmental bodies, operating at a national and cross-national level. Its governance structure would comprehend an Executive Board, a Governing Board, Advisory Boards, a Thematic Working Group and a Board of Policymakers. The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations and Professional Associations. This structure would rely on Governmental and competitive funding and would develop activities such as: direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; and publication of policy reports, opinions, white papers, etc. The monitoring and assessment of the performance of this structure would be based on the deliverables in the annual convention and project-specific conventions with the state/Ministry of Health.

Who was involved?

- Institut National du Cancer (INC), the National Cancer Institute.
- Luxembourg Institute of Health (LIH), the Luxembourg Institute of Health.



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of national/regional/local cancer/health priorities. Lower priority should be assigned to the Mission on Cancer and European Beating Cancer Plan (EBCP) and even a lower to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high autonomy (score of 7 out of 9) for decision-making as well as for financial matters (score of 8 out of 9). Regarding the governance structure of the future NCMH, it should be a legal organisation, integrating an Executive Board, a Governing Board, Advisory Boards, and a Thematic Working Group. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Funding Agencies, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations and Professional Associations. Governmental and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives within the same organisation. Regarding the prioritisation of communication tools for public awareness and outreach, social media and in person/hybrid events should be the main communications channels used. Nonetheless, news and other tools on websites should also be prioritised, but on a second level. On a third tier of priorities lie virtual meetings, newsletters, traditional media channels (such as television, radio, newspapers, and magazines) and reports & peer reviewed publications. Lastly, workshops, group dynamics (such as focus groups) and direct emails should be given a lower priority. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Luxembourg include oversee and coordinate the implementation of the EU Cancer Mission at the level of Luxembourg, in synergy with the national projects and initiatives, such as the National Cancer Plans.

Contact Points

● Nikolai Goncharenko

Website

● National Cancer Institute

Malta



Does a NCMH-like structure exist?

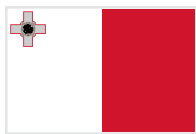
Malta does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, but there is a potential candidate or an eligible organisation entity: the Malta Council for Science and Technology. The potential NCMH candidate would operate as a Joint Venture, hosted by multiple organisations (Governmental Bodies; and Funding Agencies), and would not be endorsed by governmental bodies, although operating at a national level (the operation at a cross-national level is not known). Its governance structure would comprehend a Board of Stakeholders and a General Assembly. The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Organisations from the Social Sector and Volunteering Associations. There is no source of funding predicted for this structure yet, but it would develop activities such as: funding of internal initiatives or projects that are relevant for cancer research and/or policy making; funding of external initiatives or projects that are relevant for cancer research and/or policy making; direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; and publication of policy reports, opinions, white papers, etc. Currently there is no mechanism to monitor and assess the structure's performance.

Who was involved?

- Xjenza Malta
- Ministeru tas-Saħħa, the Ministry for Health (MFH).

Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer, the national/regional/local cancer/health priorities, the European Beating Cancer Plan (EBCP) and the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for decision-making and full autonomy (score of 9 out of 9) for financial matters. Regarding the governance structure of the future NCMH, it should be a Consortium, integrating a Board of Stakeholders, a General Assembly and Thematic Working Groups. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local) and Funding Agencies. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, social media, direct emails, newsletters, news and other tools on websites, virtual meetings, in person/hybrid events, workshops, traditional media channels (such as television, radio, newspapers, and magazines), reports & peer reviewed publications and group dynamics (such as focus groups) are equally considered to be the main communications channels used. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Malta currently does not have an established NCMH however we are currently discussing and identifying potential coordinating structures and processes and component stakeholders. Based on the findings of the ECHoS project we will proceed on the recommendations given.

Contact Points

Information not provided.

Website

Information not provided.

Netherlands



Does a NCMH-like structure exist?

The Netherlands has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named (hub of) the Netherlands Kanker Collectief (NKC). The Netherlands Kanker Collectief is the Netherlands Cancer Collective. It is an independent and open collective consisting of organisations and initiatives in healthcare and other fields. Currently, more than 100 organisations are already working together in the collective. These include patient organisations, healthcare organisations, research institutions, social organisations, (patient) advocates, funders and governments. The organisations work together as partners on concrete goals, with a focus on five featured goals of the Netherlands Cancer Agenda. (The Netherlands Cancer Agenda is the overall cancer plan for the Netherlands). The partners contribute to the realisation of the agenda, taking their own role and position. This can be done by aligning existing and new activities with the focus the agenda has indicated. The collective operates independently of political movements, but is supported by a parliamentary majority. The hub has regularly meetings with the Ministry of Health. The endorsement by governmental bodies is uncertain.

The NKC hub operates as small, agile project team. The hub's role in the collective is instigating and coordinating. The hub supports the collective and the acceleration teams and is responsible for involving all partners in the collectively for the implementation of the agenda while aligning national, regional and local initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer. The hub relies on private funding.

Currently the mechanism to monitor and assess this structure performance is based on Key Performance Indicators. Its governance structure is fulfilled by the Netherlands Comprehensive Cancer Organisation, the Dutch Cancer Society and the Dutch Federation of Cancer Patient Organisations. Both the structure and its governance is subject to annual evaluations.

Who was involved?

- The Netherlands Comprehensive Cancer Organisation (IKNL)
- Dutch Cancer Society (KWF)
- Dutch Federation of Cancer Patient Organisations (NFK)



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the national/regional/local cancer/health priorities. Slightly lower priority should be assigned to the Mission on Cancer, the European Beating Cancer Plan (EBCP) and to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it could be a Consortium, e.g. integrating Thematic Working Groups (acceleration teams) and a Governing Board. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Research Institutions, Healthcare Institutions and Patient Associations. Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, social media, direct emails, newsletters, news and other tools on websites, virtual meetings and workshops should be the main communications channels used. Nonetheless, partners of the Collective can organize in person/hybrid events, use traditional media channels (such as television, radio, newspapers, and magazines) or provide reports & peer reviewed publications, but on a second level. On a third and last tier of priorities lie group dynamics (such focus groups). In terms of activities, the NCMH should prioritise organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), participation and promotion of R&D and/or policy projects, publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

As of November 2023 the Netherlands Cancer Collective launched the Netherlands Cancer Agenda in the presence of the Minister of Health. Future activities can be summarized under the following headings: Sharing knowledge, connecting and accelerating, monitoring & evaluating.

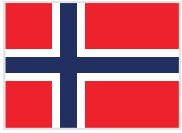
Contact Points

Carla van Laer

Website

[Nederlands Kanker Collectief](#)

Norway

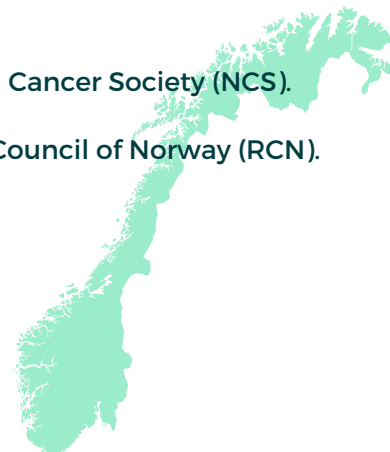


Does a NCMH-like structure exist?

Norway has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named Cancer Mission Hub Norway. This structure is a Consortium, hosted by multiple organisations (Funding Agencies; Patient Associations; and Non-profit private organisations), and is endorsed by governmental bodies, operating at a national level. Its governance structure comprehends an Executive Board, a Thematic Working Group, a Board of Stakeholders, and a Secretariat. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level, Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare institutions, Patient Associations, Professional Associations, Volunteering associations and Non-profit Organisations. There is no source of funding for this structure. The structure develops the following activities: direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level. The monitoring and assessment of the performance of this structure is based on key Performance Indicators.

Who was involved?

- Kreftforeningen, the Norwegian Cancer Society (NCS).
- Oslo Cancer Cluster (OCC).
- Forskningsrådet, the Research Council of Norway (RCN).



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and the European Beating Cancer Plan (EBCP). Lower priority should be assigned to the national/regional/local cancer/health priorities as well as other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested full autonomy (score of 9 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Consortium, integrating an Executive Board, Advisory Boards, a Thematic Working Group, and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Healthcare Institutions, Academic Organisations, Patient Associations, Professional Associations, Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Organisations from the Social Sector, Volunteering Associations and all relevant organisations including media/communication, experts in citizen engagement or policy development etc. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, social media, direct emails, newsletters, news and other tools on websites, virtual meetings, in person/hybrid events, workshops, traditional media channels (such as television, radio, newspapers, and magazines) and group dynamics (such as focus groups) should be the main communications channels used. Nonetheless, reports & peer reviewed publications should also be prioritised, but on a second level. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders) and oversight the implementation of Research and Health Policies.

Aspiring

NCMH



Expectations for the Future NCMH

Expectations for the upcoming NCMH in Norway include the Cancer Mission to have a significant impact on citizens, patients, and their next-of-kin by supporting the implementation of research-based knowledge into concrete solutions across the entire cancer pathway - spanning from prevention to care. The Norwegian NCMH envisions its role as actively engaging relevant stakeholders and in fostering a culture of collaboration to ensure that all necessary resources are effectively utilised in our collective fight against cancer. This entails mobilising actors beyond research and healthcare institutions, and beyond health when required. Our NCMH also aims at increasing the involvement of patients and citizens of Norway in the research and innovation process to guarantee that the needs of those affected by the disease are met, while also empowering individuals to take charge of their own health. By encouraging national policy and regulatory dialogues with competent authorities, our NCMH also strives to lay the groundwork for improved cancer-related legislation within the country, including for instance prevention measures, sharing/use of health data or implementation of precision cancer medicine. Finally, we have the expectation that the establishment of a European network of NCMHs will facilitate the exchange of best practices between MS/AC to assure a prompt and high-quality approach to tackling cancer in Norway.

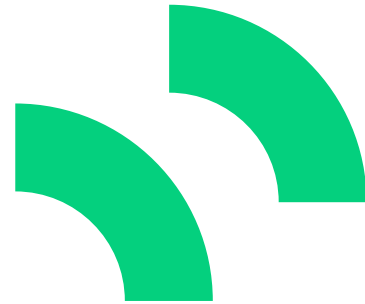
Contact Points

Marine Jeanmougin

Website

[Cancer Mission Hub Norway](#)

Poland



Does a NCMH-like structure exist?

Poland does not have a dedicated formal organisation or structure that fulfils the National Cancer Mission Hub-like structure (NCMH) role, as defined by ECHoS. However, there is an approved by Ministry of Health and Ministry of Science eligible organisation entity and coordination structure. The organisation responsible for NCMH is MSCI, and a leader is Prof. Lugowska responsible for T2.2. MSCI endorsed by governmental bodies, will be operating at a national and cross-national level. Its governance structure would comprehend an Executive Board, a Governing Board, an Advisory Board, a Thematic Working Groups, and a General Assembly.

The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Regulatory Agencies, Funding Agencies, Research Institution, Academic Organisations, Patient Associations, Healthcare institutions, Philanthropic Organisations, Professional Associations, Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers and Organisations from the Social Sector.

This structure would rely on governmental funding and would develop activities such as: direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; and publication of policy reports, opinions, white papers, etc.

The monitoring and assessment of the performance of this structure would be based on Key Performance Indicators.

Who was involved?

- Maria Skłodowska-Curie National Research Institute of Oncology (MSCI).
- The National Centre for Research and Development (NCBR).

Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the national/regional/local cancer/health priorities. Lower priority should be assigned to the Mission on Cancer and the European Beating Cancer Plan (EBCP) and even lower to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed national, with a suggested high, but not full, autonomy (score of 7 out of 9) for decision-making and financial matters.

Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating National Oncological Strategy and National Oncological Network led by Executive Board, a Governing Board, Advisory Board, a General Assembly, a Thematic Working Groups and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Academic Organisations, Research Institutions, Healthcare Institutions, Patient Associations, Professional Associations, Governmental Bodies (national, regional and local), Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Volunteering Associations and Organisations from the Social Sector. Governmental funding was highlighted as the primary funding source to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff.

Regarding the prioritisation of communication tools for public awareness and outreach, social media, direct emails, group dynamics (such as focus groups), in person/hybrid events and workshops should be the main communications channels used. Nonetheless, news and other tools on websites and traditional media channels such as television, radio, newspapers, and magazines should also be in place. Virtual meetings, reports and publications should be considered a third-tier priority, while newsletters should be given a lowest priority.

In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc. and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Poland's NCMH is under development and our strategy is not implemented yet.

Contact
Points

Iwona Ługowska

Website

Information not
provided.

Portugal



Does a NCMH-like structure exist?

In Portugal there is a joint initiative acting as National Cancer Mission Hub-like structure named National Cancer Hub (NCH-PT). This structure is a coordinated action between the Portuguese General Directorate of Health and the Agency for Clinical Research and Biomedical Innovation. This structure operates at national level and is endorsed by the Portuguese government through the [interministerial order \(n.º 11429/2021\)](#).

Its governance structure is headed by the coordination team (DGS-MS & AICIB) and comprehends a Group of Stakeholders with more than 400 organisations represented, a Policy Group with 11 permanent organisations and a Citizens and Patients Forum.

The structure develops the following activities: direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; and publication of policy reports, opinions, white papers, etc. Currently, there is no steady income for this structure neither a mechanism to monitor and assess its performance.

Who was involved?

- AICIB – Agência para a Investigação Clínica e Inovação Biomédica | Agency for Clinical Research and Biomedical Innovation
- DGS-MS - Direção-Geral da Saúde - Ministério da Saúde | General Directorate of Health - Ministry of Health.



Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating Cancer Plan and national/regional/local cancer/health priorities. Even though with lower priority, other international policies such as those emerging from WHO and UN-SDG should not be overlooked. The Hub should be formally endorsed by government bodies and operate at national level for its successful implementation. The ideal NCMH should have full autonomy (score of 9 out of 9) for both decision-making and financial matters.

Regarding the governance structure of the future NCMH, it should aim for a Coordinated National Action, or a Consortium, as long as it integrates representatives of all stakeholders group in the governing bodies such as Executive Board, a Governing Board or Advisory Board. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies and Funding Agencies.

Both governmental and private funding were highlighted as the ideal sources of funding to facilitate the implementation and sustainability of a NCMH as a result from the stable public funding and flexibility on its actions provided by the different sources of private funding. A NCMH should, therefore, count with exclusive dedicated staff and other relevant resources.

Active communication with stakeholders is key. This includes, public awareness and outreach, direct emails, in person/hybrid events, printed and digital media, etc.. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation, and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders) and publication of policy reports, opinions, white papers, etc.

Expectations for the Future NCMH

Expectations for the future NCMH in Portugal include 1) aligning the National Strategy for Beating Cancer with European Cancer initiatives (such as Mission on Cancer and European Beating Cancer Plan); 2) supporting the implementation of European initiatives in Portugal to reduce inequalities in the country and to level cancer care/research to European standards, and; 3) fostering the development of a cancer community (beyond care and research) in the country.

Contact Points

José Dinis
Isabel Fernandes
Anabela Isidro
Hugo Soares

Website

Information not provided.

Romania



Does a NCMH-like structure exist?

Romania has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named Cancer Mission informal group (having as key partners the Centre for Innovation in Medicine and the Oncology Institute Cluj-Napoca). This structure is an Informal Group, hosted by multiple organisations (Research Institutes; and Healthcare Institutions), operating at a national and cross-national level. The endorsement by governmental bodies is unknown. Its governance structure comprehends a Thematic Working Group, a Governing Board, an Executive Board and Advisory Boards. The stakeholders involved in the governance of this structure are Governmental Bodies, Regulatory Agencies, Funding Agencies, Research Institutions, Academic Organisations, Healthcare institutions, Patient Associations, Professional Associations and Pharmaceutical and Biotechnological Industries. This structure relies on competitive funding and develops the following activities: aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level. The existence of a mechanism to monitor and assess the structure's performance is unknown.

Who was involved?

Asociația Centrul Pentru Inovație În Medicină, the Centre for Innovation in Medicine (INOMED).



Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating cancer Plan and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested full autonomy (score of 9 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Consortium, integrating an Executive Board, a Governing Board, Advisory Boards, a General Assembly and a Thematic Working Group. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Organisations from the Social Sector and Volunteering Associations. Governmental, private, and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, social media should be the main communication channel used. Nonetheless, group dynamics (such as focus groups), in person/hybrid events, traditional media channels (such as television, radio, newspapers, and magazines), news and other tools on websites, reports & peer reviewed publications and workshops should also be prioritised, but on a second level. On a third and last tier of priorities lie direct emails, newsletters, and virtual meetings. In terms of activities, the NCMH should prioritise publication of policy reports, opinions, white papers, etc, oversight the implementation of Research and Health Policies; Organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders) and participation and promotion of R&D and/or policy projects.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Romania include that the NCMH should be the driver of implementation of European Beating Cancer Plan and Cancer Mission at a national level.

Contact Points

● Marius Geantă

Website

● Information not provided.

Country Specific Report

Slovakia



Does a NCMH-like structure exist?

Slovakia does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, but we have a potential candidate or an eligible organisation entity: the National Oncology Institute (NOI). The potential NCMH candidate would operate as a National Cancer Institute (NOI), hosted by multiple organisations (Governmental Bodies, Research Institutes, Academic Organisations, Healthcare institutions, Patient Associations, Professional Associations, Industry, Citizens, Medical Technology Providers (NHIC – IT technology)), and would be endorsed by governmental bodies, operating at a national and cross-national level. The current NCMH-like structure has no legal entity since it is a part of the National Cancer Institute/Narodny onkologicky ustav (Healthcare provider). It is also responsible for the coordination of all stakeholders to fulfil the Action Plans of the National Oncology Program. Its governance structure would comprehend a Single Coordinator, Advisory Boards, and a Thematic Working Group. The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Academic Organisations, Healthcare Institutions, Professional Associations and Research Institutes. This structure would rely on Governmental Funding, Pharmaceutical Industry and European projects funding, and would develop activities such as: funding of internal initiatives or projects that are relevant for cancer research and/or policy making; funding of external initiatives or projects that are relevant for cancer research and/or policy making; direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; publication of policy reports, opinions, white papers, etc.; and coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level. Structure's mechanism for monitoring and assessment of performance is based on Annual Report of the NOI activities for Minister of Health of the Slovak Republic.

Who was involved?

- Narodny Onkologicky Ustav, Dep. Narodny Onkologicky Institut (NOU), the National Cancer Institute, Dep. National Oncology Institute (NOI).
- Nadácia Výskum Rakoviny (NVR), the Slovak Cancer Research Foundation.

Aspiring

NCMH



The NCMH should equally prioritise actions/activities in the scope of the Mission on Cancer, European Beating cancer Plan and national/regional/local cancer/health priorities. Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested full autonomy (score of 9 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating a single coordinator, an Executive Board, a Governing Board, Advisory Boards, a General Assembly, a Thematic Working Group, a Board of Stakeholders, and a Board of Policymakers. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Research Institutions, Healthcare Institutions, Academic Organisations, Patient Associations, Professional Associations, Organisations from the Social Sector and Citizens. Governmental and European funding (EU projects) were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count not exclusively on a dedicated staff but also on a staff shared with other initiatives in the same organisation, shared with other initiatives in different organisations or outsourced with service providers. Regarding the prioritisation of communication tools for public awareness and outreach, social media, news and other tools on websites, traditional media channels (such as television, radio, newspapers, and magazines), and in person/hybrid events should be the main communications channels used. Nonetheless, group dynamics (such as focus groups), workshops and newsletters should also be prioritised, but on a second level. On a third and last tier of priorities lie direct emails, virtual meetings, and reports & peer reviewed publications. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation, and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Include a joint cooperation on the creation of NCMHs in member states and associated countries to implement the Cancer Mission objectives by close networking of all relevant stakeholders, policymakers, and citizens. The NCMH in Slovakia should: facilitate integration of the activities of the Mission on Cancer at national, regional, and local levels e.g., identifying synergies between European, national, regional, and local policies and initiatives related to cancer; facilitate engagement of relevant actors and stakeholders at national, regional or local level going beyond the research and innovation and health systems to cover all relevant areas in cancer control and support policy dialogues on cancer (examples include employment, education, socio-economic aspects); and support citizen engagement activities at national, regional and local levels, including new participatory formats.

Contact Points

Mária Rečková and
Soňa Čierniková

Website

National Oncology
Institute

Slovenia

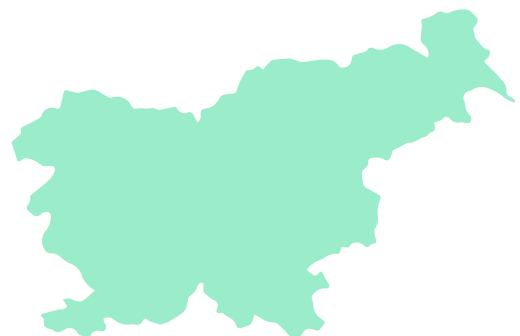


Does a NCMH-like structure exist?

Slovenia currently lacks a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS. However, the current situation revolves around informal conversations with various stakeholders. So far, there is no potential candidate for the role of an NCMH.

Who was involved?

Nacionalni Institut za Javno Zdravje (NIJZ, the National Institute of Public Health).



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer, the national/regional/local cancer/health priorities and the European Beating Cancer Plan (EBCP). Lower priority should be assigned to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high, but not full, autonomy (score of 7 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a legal organisation, integrating an Executive Board and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Pharmaceutical and Biotechnological Industries and Professional Associations. Governmental and private funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, direct emails, in person/hybrid events, traditional media channels (such as television, radio, newspapers, and magazines), news and other tools on websites, social media and virtual meetings should be the main communications channels used. Nonetheless, reports & peer reviewed publications should also be prioritised, but on a second level. On a third and last tier of priorities lie group dynamics (such as focus groups), newsletters and workshops. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Slovenia include establishing a hub where knowledge, experience, information, and data could be exchanged between medical and oncology experts, researchers, representatives of civil society and patients' representatives, representatives of the economy and ministries responsible for health and science, as well as relevant sectoral agencies.

Contact
Points



Information not
provided.

Website



Information not
provided.

Spain



Does a NCMH-like structure exist?

Spain has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named Spanish Mirror Group Cancer Mission. This structure is a Consortium, hosted by a Research Public Organisation, and is endorsed by governmental bodies, operating at a national level. Its governance structure comprehends a General Assembly and a Board of Stakeholders. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level, Research Institutions, Academic Organisations, Healthcare Institutions, Volunteering Associations, Pharmaceutical and Biotechnological Industries, Medical Technology Providers and Patient Associations. There is no source of funding for this structure. The structure develops the following activities: awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; publication of policy reports, opinions, white papers, etc. The existence of a mechanism to monitor and assess the structure's performance is unknown.

Who was involved?

Fundación TECNALIA Research & Innovation, the Foundation TECNALIA Research & Innovation.



Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and slightly lower to the national/regional/local cancer/health priorities and to the European Beating Cancer Plan (EBCP). Lower priority should be assigned to the other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested full autonomy (score of 9 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a Coordinated National Action, integrating an Executive Board, a General Assembly, Advisory Boards and a Thematic Working Group. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Organisations from the Social Sector and Volunteering Associations. Governmental, private and competitive funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on very limited dedicated staff and should count on other contributors. Regarding the prioritisation of communication tools for public awareness and outreach, in person/hybrid events, traditional media channels (such as television, radio, newspapers, and magazines) and social media should be the main communications channels used. Nonetheless, virtual meetings should also be prioritised, but on a second level. On a third tier of priorities lie news and other tools on websites and newsletters. Direct emails, workshops, reports & peer reviewed publications and group dynamics (such as focus groups) are not considered to be a priority communication tool. In terms of activities, the NCMH should prioritise organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), oversight the implementation of Research and Health Policies and publication of policy reports, opinions, white papers, etc.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Spain include that all countries were strongly addressed in the same direction in terms of plans and policies that should be implemented for early diagnosis and patients care. Secondary, the transnational cooperation-coordination between the different hubs.

Contact Points

● Rosario Perona

Website

● Information not provided.

Sweden



Does a NCMH-like structure exist?

Sweden does not have a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, but we have some potential candidates or eligible organisations entities: reference groups on cancer Swedish Board of Health and Welfare and Vinnova (the Swedish Innovation Agency); Vision Zero Cancer; and Confederation of Regional Cancer Centres. The potential NCMH candidate would operate as a Legal Organisation, hosted by multiple organisations (Governmental Bodies and Research Institutes), and would be endorsed by governmental bodies, operating at a national and cross-national level. Its governance structure would comprehend an Executive Board, a Governing Board and Advisory Boards. The stakeholders involved in the governance of this structure would be Governmental Bodies operating at national level, Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Pharmaceutical and Biotechnological Industries and Medical Technology Providers. This structure would rely on Governmental Funding, and would develop activities such as: aligning national, regional and local policy levels, initiatives, and/or R&I funding, with Europe's Beating Cancer Plan and Mission on Cancer; coordinating and providing feedback to the development of EU policy and funding based on evidence gathered from multiple stakeholders, at national, regional and local level; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; publication of policy reports, opinions, white papers, etc.; and direct participation initiatives or projects that are relevant for cancer research and/or policy-making. There is not yet a mechanism to monitor and assess the structure's performance.

Who was involved?

- Karolinska Universitetssjukhuset, Region Stockholm (KUH, RS), the Karolinska University Hospital, Stockholm Region.
- Stiftelsen Stockholm School of Economics Institute for Research (SIR), coordinator of the Vinnova-funded innovation milieus VISION ZERO CANCER and TESTBED SWEDEN PRECISION HEALTH CANCER, the Stockholm School of Economics Institute for Research Vision Zero Cancer.
- Regionala cancercentrum i samverkan (RCC), the Confederation of regional cancer centres.

Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and the European Beating Cancer Plan (EBCP). Lower priority should be assigned to the national/regional/local cancer/health priorities and to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested low autonomy (score of 3 out of 9) for decision-making and a medium autonomy (score of 5 out of 9) for financial matters. Regarding the governance structure of the future NCMH, it should be a Consortium, integrating an Executive Board, a Governing Board, Advisory Boards, a General Assembly, a Thematic Working Group and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local), Regulatory Agencies, Funding Agencies, Philanthropic Organisations, Research Institutions, Academic Organisations, Healthcare Institutions, Patient Associations, Professional Associations, Non-health related Industry, Pharmaceutical and Biotechnological Industries, Medical Technology Providers, Organisations from the Social Sector and Volunteering Associations. Governmental and private funding were highlighted as the sources of funding to facilitate the implementation and sustainability of an NCMH and its goals. The NCMH should count on a shared staff with other initiatives in different organisations. Regarding the prioritisation of communication tools for public awareness and outreach, social media, newsletters and news and other tools on websites should be the main communications channels used. Nonetheless, virtual meetings, in person/hybrid events and workshops should also be prioritised, but on a second level. On a third tier of priorities lie group dynamics (such as focus groups) and traditional media channels (such as television, radio, newspapers, and magazines). Lastly, reports & peer reviewed publications and direct emails should be given a lower priority. In terms of activities, the NCMH should prioritise participation and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops, and related events; or policy dialogues with multiple stakeholders) and publication of policy reports, opinions, white papers, etc.

Expectations for the Future NCMH

Expectations for the upcoming NCMH in Sweden include developing methodology and networks to meet the challenge - to cover the entire nation, not only the main city regions. Involvement of all the different stakeholders to enable inclusion of the whole country and all citizens. To involve the citizens and aim for a common sense of belonging in the activities to promote the implementation of EU Cancer Mission. To coordinate and develop a national collaborative environment that will be able to work together with other NCMH in EU.

Contact Points

● Kjell Ivarsson

Website

● Information not provided.

Türkiye



Does a NCMH-like structure exist?

Türkiye has a dedicated organisation or structure fulfilling the role of a National Cancer Mission Hub-like structure, as defined by ECHoS, named TÜSEB (Türkiye Cancer Institute). This structure is a Legal Organisation, hosted by multiple organisations (Governmental Bodies; Research Institutes; and Funding Agencies), and is endorsed by governmental bodies, operating at a national level. Its governance structure comprehends an Executive Board. There are two scientific advisory boards as “Basic Oncology, Cancer Genetics and Cancer Molecular Biology Scientific Advisory Board” and “Clinical Oncology and Research Scientific Advisory Board” consisting of experts in their fields in order to provide scientific support to the Türkiye Cancer Genome Project, prepare national cancer programs and policies, create and standardize of national cancer treatment guidelines, establish infrastructure, scientific support and coordination mechanisms for clinical research, determine relevant subject headings in project calls, make suggestions for planning meetings, training, seminars, courses, symposiums and similar scientific activities and provide scientific support to activities aimed at preparing books, publications and reports. The stakeholders involved in the governance of this structure are Governmental Bodies operating at national level. This structure relies on Governmental funding and develops the following activities: funding of internal initiatives or projects that are relevant for cancer research and/or policy making; funding of external initiatives or projects that are relevant for cancer research and/or policy making; direct participation initiatives or projects that are relevant for cancer research and/or policy-making; activities of awareness raising and mobilising for projects that are relevant for cancer research and/or policy-making; organisation of events (citizen engagement events; knowledge exchange, trainings, workshops, and related events; policy dialogues with multiple stakeholders); aligning national, regional and local policy levels, initiatives, and/or R&D funding, with Europe’s Beating Cancer Plan and Mission on Cancer; and publication of policy reports, opinions, white papers, etc. The monitoring and assessment of the performance of this structure is based on Key Performance Indicators.

Who was involved?

Türkiye Sağlık Enstitüleri Başkanlığı (TÜSEB), the Health Institute of Türkiye.

Aspiring

NCMH



The NCMH should focus and prioritise activities within the scope of the Mission on Cancer and the European Beating Cancer Plan (EBCP). Lower priority should be assigned to the national/regional/local cancer/health priorities, and an even lower to other international policies, such as those of the WHO and UN-SDG. The Hub should be formally endorsed by government bodies, operating at national level for its successful implementation. The ideal operational level is deemed to be national, with a suggested high autonomy (score of 8 out of 9) for both decision-making and financial matters. Regarding the governance structure of the future NCMH, it should be a legal organisation, integrating an Executive Board, Advisory Boards, a General Assembly, and a Board of Stakeholders. The suggested entities for integration into NCMH governing bodies include Governmental Bodies (National, Regional, Local). Governmental funding was highlighted as the primary source of funding to facilitate the implementation and sustainability of an NCMH and its goals. This NCMH should count on an exclusive dedicated staff. Regarding the prioritisation of communication tools for public awareness and outreach, in person/hybrid events, reports & peer reviewed publications, social media and virtual meetings should be the main communications channels used. Nonetheless, traditional media channels (such as television, radio, newspapers, and magazines) and workshops should also be prioritised, but on a second level. On a third and last tier of priorities lie direct emails, group dynamics (such as focus groups), news and other tools on websites and newsletters. In terms of activities, the NCMH should prioritise funding of external R&D and/or policy projects, participation, and promotion of R&D and/or policy projects, organisation of events (e.g.: citizen engagement events; knowledge exchange, trainings, workshops and related events; or policy dialogues with multiple stakeholders), publication of policy reports, opinions, white papers, etc and oversight the implementation of Research and Health Policies.



Expectations for the Future NCMH

Expectations for the upcoming NCMH in Türkiye include the potential to greatly impact the implementation of the EU Cancer Mission in our country. By working together to implement the NCMH, countries can make significant progress in cancer mission, ultimately improving the lives of millions of people affected by cancer. Expectations are to implement NCMHs according to the bespoke implementation plans, assess effectiveness of guidelines and identifying areas for improvement and make sure the long-term sustainability of established NCMHs.

Contact Points

● Selin Şimşek

Website

● [Türkiye Cancer Institute](#)



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